

09/889822

INVESTIGATIVE AREA

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION  
O.I.P.E. CLASSIFIER  
FORMALITY REVIEW  
RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

✓ =  
- (Throughput)  
Rejected  
Accepted  
Rejected  
Accepted  
None edited  
Interference  
Appeal  
Corrected

Claim	Date	Claim	Date	Claim	Date
1	6/10/4	1		1	
2	6/10/4	2		2	
3	6/10/4	3		3	
4	6/10/4	4		4	
5	6/10/4	5		5	
6	6/10/4	6		6	
7	6/10/4	7		7	
8	6/10/4	8		8	
9	6/10/4	9		9	
10	6/10/4	10		10	
11	6/10/4	11		11	
12	6/10/4	12		12	
13	6/10/4	13		13	
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96	6/10/4	96		96	
97	6/10/4	97		97	
98	6/10/4	98		98	
99	6/10/4	99		99	
100	6/10/4	100		100	

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